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27195 7590 11/18/2004

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24TH FLOOR, NATIONAL CITY CENTER
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CLEVELAND, OH 44114

01/27/2005 MGEBREM2 00000062 500463 10085792

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Noemi Tovar	(Depositor's name)
<i>Noemi Tovar</i>	
(Signature)	
1-19-05	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/085,792	02/28/2002	Jeremy Paul Cahill	MS188865.1	8021

TITLE OF INVENTION: SYSTEM AND METHOD TO FACILITATE NATIVE USE OF SMALL FORM FACTOR DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$0	\$1370	02/18/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
FAROOQ, MOHAMMAD O	2182	710-062000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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1. _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MICROSOFT CORP.

REDMOND, WA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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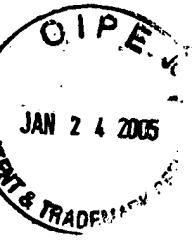
Typed or printed name *James Banowsky*

Date *1/19/05*

Registration No. *37,773*

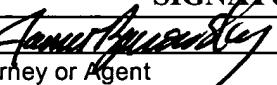
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/085,792
		Filing Date	February 28, 2002
		First Named Inventor	Jeremy Paul Cahill
		Group Art Unit	2182
		Examiner Name	Farooq, Mohammad O.
<input type="checkbox"/> Sent via Express Mail Label No.:		Attorney Docket Number	188865.01

ENCLOSURES (check all that apply)					
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement with Form PTO/SB/08A (pages) <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5		<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) (sheets) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Newly Executed (pages) <input type="checkbox"/> A copy from a prior application (37 CFR 1.63(d)) (pages) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)		<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <input checked="" type="checkbox"/> Issue Fee Payment <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
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SIGNATURE OF ATTORNEY OR AGENT					
Signature			Reg. No.	37,773	
Name of Attorney or Agent		James Banowsky			
Date	January 19, 2005	Tel.	(425) 705-3539	Facsimile No.	(425) 936-7329
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Customer Number:			22971		